TOWN OF DAVIE TOWN COUNCIL AGENDA REPORT

TO: Mayor and Councilmembers

FROM/PHONE: Bruce Taylor/954-327-3748

PREPARED BY: Heidi Cavicchia

SUBJECT: Resolution

AFFECTED DISTRICT: Townwide

TITLE OF AGENDA ITEM:

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, APPROVING THE AWARD OF THE BID FOR LOCATING AND MARKING UNDERGROUND FACILITIES TO CRAIG A. SMITH & ASSOCIATES, INC.

REPORT IN BRIEF:

This request is to hire a firm to locate and mark underground utilities on an as needed basis. The Town is required per State Statute #556.103 to locate underground utilities for any person performing excavation within the Town. These utility locates prevent contractors from damaging or breaking underground utility lines. This, in turn, prevents health and safety issues. For example a broken water line can reduce or eliminate fire protection or introduce contaminants into the water supply which would require a boil water notice to be issued. A broken sewer line could expose the public to raw sewage.

The Town solicited sealed bids for these services. The Town sent bid specs to six (6) potential bidders and received two responses – one (1) and one (1) no bid. Craig A. Smith and Associates, Inc. was the only bidder. Craig A. Smith & Associates has been providing locating services in the Town of Davie for the past two years under a Broward County contract which has since expired and has become familiar with the location of our lines. We have examined the vendor and find the company to be a responsive and responsible firm.

Although the total bid price was \$99,766.90, quantities were estimated for bidding purposes only. We feel confident that the approximate cost of \$80,000 on the procurement authorization will be adequate to cover our expenses for each fiscal year.

PREVIOUS ACTIONS: None

CONCURRENCES: N/A

FISCAL IMPACT:

Has request been budgeted? Yes

If yes, expected cost: \$80,000/year

Account Name: Contractual Services - 040-1058-536-0306

RECOMMENDATION(S):

Motion to approve the Resolution

Attachment(s): Resolution, Utilities Department Recommendation, Procurement Authorization, Bid Opening Report, Costs of Services Proposal, Form W-9, Town of Davie Vendor/Bidder Disclosure, State of Florida Public Inquiry, State of Florida

RESOLUTION NO. R-2006-____

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, APPROVING THE AWARD OF THE BID FOR LOCATING AND MARKING UNDERGROUND FACILITIES TO CRAIG A. SMITH & ASSOCIATES, INC.

WHEREAS, the Town is in need of a service to locate and mark underground facilities for the Utilities Department; and

WHEREAS, the Town solicited sealed bids for this service;

WHEREAS, after review, the Town Council wishes to accept the bid from Craig A. Smith and Associates, Inc.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE, FLORIDA:

<u>SECTION 1</u>. The Town Council hereby accepts the bid of Craig A. Smith and Associates, Inc.

<u>SECTION 2.</u> The Town Council hereby authorizes the expenditure from the Utilities Department – Contractual Services account.

<u>SECTION 3.</u> The initial contract term is a three (3) year term with an option to extend the contract for two (2) additional two (2) year terms by mutual agreement of the parties. Contract extensions, if appropriate, will be subject to approval by Town Council

SECTION 3. This resolution shall take effect immediately upon its passage and adoption.

PASSED AND ADOPTED THIS	S DA	AY OF	, 2006.
		MAYOR/COUNCILMEMB	ER
Attest:			
TOWN CLERK			
APPROVED THIS	DAY OF	, 4	2006.



Administration	797-1030	Parks & Recreation	797-1145
Budget & Finance	797-1050	Police Department	693-8200
Development Services	797-1111	Public Works	797-1240
Engineering	797-1113	Town Clerk's Office	797-1023
Fire Department	797-1090	Utilities	327-3742
Human Resources	797-1010		

TOWN OF DAVIE UTILITIES 6591 Orange Drive, Davie, Florida 33314-3399 (954) 327-3742

MEMORANDUM

TO:

Herb Hyman, Procurement Manager

FROM:

Bruce Taylor, Utilities Director

DATE:

September 7, 2006

RE:

Bid Recommendation - Locating and Marking Underground Facilities

The Utilities Department would like to recommend awarding the bid to Craig A. Smith & Associates for locating and marking underground facilities. Craig A. Smith was the only bidder for this contract. Craig A. Smith and Associates has been providing locating services to the Town for the past two years, has become familiar with the location of our lines, and we feel they have been doing an exceptional job in keeping up with locate requests and accurately marking lines to minimize damage to our facilities.

If you need additional information, please contact me.

:hkc

TOWN OF DAVIE PROCUREMENT AUTHORIZATION

ACCOUNT NUMBER	BUDGET ITEM & DESCRIPTION	APPROXIMATE COST
)40-1058-536-0306	Underground Utility Locating & Marking	\$80,000 (FY 06/07)
METHOD OF PROCURE	EMENT (check the one that applies)	
X Open Competitive B Piggyback on Contr Sole Source Request For Propos	act Number	
SPECIFICATIONS & LIS	T OF VENDORS MUST BE ATTACHED	
	Signed Bun Departr	er Caylor
	Have Funds been F	
	Date_7/28/06_Si	gred FUNDS FROM FY
	Signed	
	Town A	dministrator
VFN	<u>BIDS SUBMITTED</u> DOR	COST
Α.	M & Associarés, INC.	#99,766.90 No BID
		*
	Simod	1/1/
	Signed	Procurement Manager
	SPECIFICATION COMMITTEE'S RECOM	
Vendor		Cost
CRAIL A-SM	ITH + ACSOCIATES, Twe.	\$ 99,766.90

RID OPENING REPORT

	ONTRACTO			BID AMOL			CIAL RAN	KINC
	RAIC			997	66.90	-	1	
I	WFNA	MA	P	No	BID	-		
	,						•	
\vdash			. , ,					
EMARKS		,						
OTE: TI	HE ABOVE E					ED, AND B		

TO: Owner

All blanks have been filled in, BID SHEET is attached to the completed "invitation For Bid" and returned herewith. In accordance with all terms, conditions, specifications and requirements, the bidder offers the following (estimated quantities are for bidding purposes only):

Item #	Estimated Annual Quantity	Unit	Description of Service	Unit Price	Item Total
			Standard Locate and mark ALL City Owned Facilities in the Area Specified in the SSOCOF Ticket, or White		
1	2,500	EA	Lined by Excavator. See Attachment "B" - Standard Locate	\$ 16.50	\$41,250.00
			Locates with Ground Penetrating Radar (GPR) and Mark City Owned Facilities.		
2	200	EA	See Attachment "B" - GPR Locates	\$125.00	\$ 25,000.
			Locate with Vacuum Digging (POT-HOLING) and Mark City Owned Facility. See	110-10	1
3	100	EA	Attachment "B" - Potholing.	\$ 170.00	17 000.00
			Placement of Electronic Markers after a line has been exposed through Vacuum Digging. Owner to supply		
4	100	EA	Electronic Markers. See Attachment "B" - Placement of Electronic Markers.	\$0.01	\$ 1.00
			The taking of GPS coordinates utilizing sub-meter equipment. See Attachment "B" - GPS	\$ 50.00	110 000 00
5	200	EA	Coordinates.	\$ 50.00	\$ 10,000.00



6	10	EA	Emergency – Standard Locate 5:00 p.m. – 5:00 a.m. Weekdays and all day Saturday & Sunday. See Attachment "B" - Emergency Locates.	\$1.00	\$ 10.00
0	10	27.			
			Electronic Ticket Management. Receipt and Delivery of Request to Locate tickets from Sunshine State	4000	\$ 1,500.00
7	2,500	EA	One Call.	p.0.00	P 17
8	2,500	EA	Screened and Cleared Tickets. Receive Request to Locate ticket from SSOCOF, screen and clear for "out of area" etc. See Attachment "B" - Screen & Clear Tickets.	\$2.00	\$5,000.00
9	1	SF	Radar Tomography Services. Perform Radar Tomography services for small surface area at least 1000 SF to a maximum of 5000 SF. Price per SF. See Attachment "B" - Radar Tomography (small area).	\$1.50	\$1.50
10	1	SF	Radar Tomography Services. Perform Radar Tomography services for medium surface area at least 5001 SF to a maximum of 25000 SF. Price per SF. See Attachment "B" - Radar Tomography (medium area).	\$ 0.70	\$0.70
			Radar Tomography Services. Perform Radar Tomography services for large surface area at least 25001 SF and greater. Price per SF. See Attachment		
11	1	SF	"B" - Radar Tomography (large area).	\$ 0.45	\$ 0.45



Arrayed Inductive Receiver System - Deep Pipe Locates. Perform A.I.R. System locates for deep facilities (greater than 12' in depth) over a surface area of at least 1000 SF to a maximum of 5000 SF. Price per SF. See Attachment "B" -A.I.R. System Locates. SF 1 12 Total for One (1) Year Usage Submission of a Bid will be construed that the Bidder is acquainted sufficiently with the work to be performed. Acknowledgment is hereby made of the following Addenda or Amendments (identified by number)

NAME OF COMPANY: CRAIG A. SMITH & ASSOCIATES

AUTHORIZED SIGNATURE:

July 2006

received since issuance of this bid:

By signing this bid sheet the firm is agreeing to the terms and conditions of the Invitation for Bid.



In accordance with "Special instructions to Bidder" indicate if an exception to insurance requirements is being requested. Be specific and state reason:
WOULD YOU ACCEPT CREDIT CARDS AS PAYMENT FROM Owner? YES " NO "
THE UNDERSIGNED BIDDER WILL EXTEND THE SAME PRICE, TERMS AND CONDITIONS TO OTHER GOVERNMENTS LOCATED IN BROWARD COUNTY DURING THE PERIOD COVERED BY THIS CONTRACT, IF REQUESTED.
YES " NO "
WILL THIS PRICING BE EXTENDED TO OTHER GOVERNMENTS LOCATED IN DADE OR PALM BEACH COUNTIES?
YES " NO "
OTHER GOVERNMENTS LOCATED WITHIN THE STATE OF FLORIDA? YES " NO "
ACKNOWLEDGMENT IS HEREBY MADE OF THE FOLLOWING ADDENDA OR AMENDMENTS (IDENTIFIED BY NUMBER) RECEIVED SINCE ISSUANCE OF THIS BID:
E-MAIL ADDRESS: gjeffrus @craigasmith.com CELLULAR# 754-224-1672
CELLULAR # 754-224-1672
FEDERAL TAX ID #_ 59 - 2010474
REMIT ADDRESS. POBOX 9845
FORT LAUDERDALE, FL 33310-9845
NAME OF COMPANY: CRAIG A. SMITH + ASSOCIATES
AUTHORIZED SIGNATURE:

BID SHEET

Bid submitted by:
Name: (printed) GREGORY W. JEFFRIES Title: VICE PRESIDENT
Company: (legal registered) CR41G A. SMITH & ASSOCIATES, NC.
Address: 1000 W. McNA3 RD, #200
City: POMPANO BEACH State: FL Zip: 33069
Telephone No.: 954-782-8222 Fax No.: 954-786-8927
Signature:
Our company will, will not accept the Town of Davie VISA Credit card for payment.

You must submit a completed W-9 form and a completed Vendor/Bidder Disclosure form with your bid.



Form W-9

Request for Taxpayer

Give form to the requester. Do not

Designant of the Trussing Internal Revenue between	Identification Number and Certi	neation	send to the IRS
Name las stiguen on ,	. SMITH & ASSOCIATES, INC.		
Business name, if unit			
	Corporation Partnership Chie	>	Exempt from backu
E 1000 W. M	et, and apt or suite no.) CN48 Rp., SUITE 200	Requester's name an	d address (optional)
	Beach, FC 33069		
List account number(s)	here (optional)		
	dentification Number (TIN)		
your employer identification r	garded entity, see the Part I instructions on page 3. For other entition number (EIN). If you do not have a number, see <i>How to get a TIN</i> or the than one name, see the chart on page 4 for guidelines on whose	page 3.	or dentification number
Part II Certification			
Under penalties of perjury, I c	ertify that:		
	s form is my correct taxpayer identification number (or I am waiting		
Revenue Service (IRS) that	o withholding because: (a) I am exempt from backup withholding, or I am subject to backup withholding as a result of a failure to report nger subject to backup withholding, and	(b) I have not been n t all interest or divider	otified by the Internal nds, or (c) the IRS has
3. I am a U.S. person (includi			
vithholding because you have or mortgage interest paid, acc	i must cross out item 2 above if you have been notified by the IRS failed to report all interest and dividends on your tax return. For real pusition or abandonment of secured property, cancellation of debt. by, payments other than interest and dividends, you are not required the instructions on page 4)	estate transactions, contributions to an inc	item 2 does not apply.
ign Signature of U.S. person >	71/1	. 8-14	-04
	(HI)		

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

- U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting if it is requester and, when applicable, to
- 1. Certify that the Tity you are giving is correct for you are waiting for a number to be issued),
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a
- U.S. exempt payee

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income

Note. If a requester gives you a form other than Form W.9 to request your TPV, you must use the requester's form if it is substantially rankal to the Form by 9

For federact & purposes, you are considered a personal you are:

- An individual who is a citizen or resident of the United States
- A partnership, corporation, company, or association created or organized in the United States or under the laws' of the United States, or
- · Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners, share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

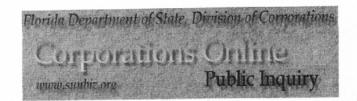
The person who gives Form W 9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

The U.S. owner of a disregarded entity and not the entity.

Town of Davie Vendor/Bidder Disclosure

ny legal, equitable, of belown are as follows (Post all Legal Name	Office addresses at Addr		e):		the
	Office addresses ar	e not acceptable	e):		Š
vilocal aquitable or bon	neficial interest in the			ction with	the §
The full legal names an bcontractors, materialme	en, suppliers, labore	ers, and lenders)	who have, or	r will have	
TOI C 11 1 1	11 1		11.11.17.1	1	_%
	· · · · · · · · · · · · · · · · · · ·	10121,10			
M. Dale Mil		3 57 POINT, FL &		33.3	
GENER. SCHEI	NER WELLING	8. CL48 DR 670N, FL 330	144	33.3	%
STEPHEN C.		TON, FL 33 3. CLUB DR		33,3	_%
Full Legal Nam	ne Add	ress M4Jorca PL	Owne	ership	
rovided for each trustee a ollows (Post Office addre	and each beneficiar	y. All such nan			
who directly or indirectly ne contract or business tr	holds five percent	(5%) or more of	the corporat	ion's stock	c. If
. If the contract or business address shall be	iness transaction is	with a corporati	on, the full le	egal name stockholde	and
WNERSHIP DISCLO	SURE AFFIDAV	IT			
tate and date of incorpor	ration	FL, A	ugust.	1/1980	0
EIN			-20104		_
			BEACH, F		9
Address:			W. McNA		
Name of Individual, Firm	n, or Organization:		. Su174 f		
					/

By: Au S	Date: 8-21-04
Signature of Affiant CRESON W. SEFFLIES Print Name	
SUBSCRIBED AND SWORN TO or affire	med before me this day of, he/she is
personally known to me or has presented _ identification.	
	J. Heidi Du Bree
	Notary Public, State of Florida at Large
	Print or Stamp of Notary 1. Heldi DuBree My Commission DD238775
	Serial Number Expres November 18, 200
	My Commission Expires :



Florida Profit

CRAIG A. SMITH & ASSOCIATES, INC.

PRINCIPAL ADDRESS 1000 W. MCNAB RD. SUITE 200 POMPANO BCH. FL 33069 Changed 01/07/2003

MAILING ADDRESS 1000 W. MCNAB RD. SUITE 200 POMPANO BCH. FL 33069 Changed 01/07/2003

Document Number 681464 FEI Number 592010476

Date Filed 08/07/1980

State FL Status ACTIVE Effective Date NONE

Last Event NAME CHANGE AMENDMENT

Event Date Filed 05/30/2001 Event Effective Date NONE

Registered Agent

Name & Address	
SMITH, STEPHEN C. 1000 W MCNAB RD STE 200 POMPANO BCH FL 33069	
Name Changed: 01/26/2005	
Address Changed: 05/04/1998	

Officer/Director Detail

Name & Address	Title
SMITH, STEPHEN C.	

9960 MAJORCA PL	VD
BOCA RATON FL	
MILITA, M. DALE 36910 3RD ST.	VD
CANAL POINT FL	
SCHRINER, GENE R. 1975 SOUTH CLUB DRIVE	PD
W. PALM BEACH FL	
MCBRIDE, STEPHEN A. 6001 NW 62 COURT	s
PARKLAND FL 33067	

Annual Reports

Report Year	Filed Date	
2004	03/22/2004	
2005	01/26/2005	
2006	03/22/2006	

Previous Filing

Return to List

Next Filing

View Events View Name History

Document Images

Listed below are the images available for this filing.

03/22/2006 -- ANNUAL REPORT

01/26/2005 -- ANNUAL REPORT

03/22/2004 -- ANNUAL REPORT

01/07/2003 -- ANNUAL REPORT

04/09/2002 -- COR - ANN REP/UNIFORM BUS REP

05/30/2001 -- Name Change

02/19/2001 -- ANN REP/UNIFORM BUS REP

04/17/2000 -- ANN REP/UNIFORM BUS REP

03/06/1999 -- ANNUAL REPORT

05/04/1998 -- ANNUAL REPORT

07/29/1997 -- ANNUAL REPORT

05/01/1996 -- 1996 ANNUAL REPORT

THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT